



**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration Submitted with Initial Filing       Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

<b>Attorney Docket Number</b>		J-3598A
<b>First Named Inventor</b>		Robert R. Turvey
<b>COMPLETE IF KNOWN</b>		
<b>Application Number</b>		10 / 722,860
<b>Filing Date</b>		November 26, 2003
<b>Art Unit</b>		3727
<b>Examiner Name</b>		

**As the below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**STACKING DEVICE FOR THERMOPLASTIC CONTAINERS AND/OR LIDS**

*(Title of the Invention)*

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) 11/26/2003 as United States Application Number or PCT International

Application Number 10/722,860 and was amended on (MM/DD/YYYY)   (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

<b>Prior Foreign Application Number(s)</b>	<b>Country</b>	<b>Foreign Filing Date (MM/DD/YYYY)</b>	<b>Priority Not Claimed</b>	<b>Certified Copy Attached?</b>	
				<b>YES</b>	<b>NO</b>
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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## DECLARATION — Utility or Design Patent Application

Direct all correspondence to:  Customer Number  
or Bar Code Label 28165 OR  Correspondence address below

Name Kristin L.Chapman

S.C. Johnson & Son, Inc.  
Address 1525 Howe Street, MS 077

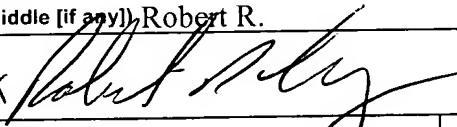
City Racine State WI ZIP 53403

Country USA Telephone 262-260-2722 Fax 262-260-4253

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :  A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) Robert R. Family Name or Surname Turvey

Inventor's Signature  Date 12/10/03

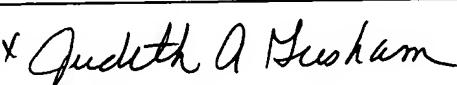
Residence: City Sanford State MI Country USA Citizenship USA

Mailing Address 500 Peterson Drive

City Sanford State MI ZIP 48657 Country USA

NAME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) Judith A. Family Name or Surname Gresham

Inventor's Signature  Date 12/10/03

Residence: City Midland State MI Country USA Citizenship USA

4020 Elm Court

Mailing Address

City Midland State MI ZIP 48642 Country USA

 Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box →

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Craig R.		Gosen	
Inventor's Signature	<i>Craig R. Gosen</i>		Date <u>12/10/03</u>
Residence: City Sanford	State MI	Country USA	Citizenship USA
Mailing Address 4271 Sanford Lake Road			
Mailing Address			
City Sanford	State MI	ZIP 48657	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Christine A. L.		Howell	
Inventor's Signature			Date
Residence: City Clinton Township	State MI	Country USA	Citizenship USA
Mailing Address 35416 Golden			
Mailing Address			
City Clinton Township	State MI	ZIP 48035	Country USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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(Title of the Invention)

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OR

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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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or Bar Code Label 28165 OR  Correspondence address below

Name **Kristin L.Chapman**

S.C. Johnson & Son, Inc.  
Address 1525 Howe Street, MS 077

City <b>Racine</b>	State <b>WI</b>	ZIP <b>53403</b>
--------------------	-----------------	------------------

Country <b>USA</b>	Telephone <b>262-260-2722</b>	Fax <b>262-260-4253</b>
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :	<input type="checkbox"/> A petition has been filed for this unsigned inventor
----------------------------------	---

Given Name (first and middle [if any]) <b>Robert R.</b>	Family Name or Surname <b>Turvey</b>
--	---

Inventor's Signature	Date
-------------------------	------

Residence: City <b>Sanford</b>	State <b>MI</b>	Country <b>USA</b>	Citizenship <b>USA</b>
--------------------------------	-----------------	--------------------	------------------------

Mailing Address **500 Peterson Drive**

City <b>Sanford</b>	State <b>MI</b>	ZIP <b>48657</b>	Country <b>USA</b>
---------------------	-----------------	------------------	--------------------

NAME OF SECOND INVENTOR:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
--------------------------	---

Given Name (first and middle [if any]) <b>Judith A.</b>	Family Name or Surname <b>Gresham</b>
--	--

Inventor's Signature	Date
-------------------------	------

Residence: City <b>Midland</b>	State <b>MI</b>	Country <b>USA</b>	Citizenship <b>USA</b>
--------------------------------	-----------------	--------------------	------------------------

**4020 Elm Court**

Mailing Address

City <b>Midland</b>	State <b>MI</b>	ZIP <b>48642</b>	Country <b>USA</b>
---------------------	-----------------	------------------	--------------------

Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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PTO/SB/02A (11-00)

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## DECLARATION

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Craig R.		Gosen	
Inventor's Signature		Date	
Residence: City Sanford		State MI	Country USA
Citizenship USA			
Mailing Address 4271 Sanford Lake Road			
Mailing Address			
City Sanford		State MI	ZIP 48657
Country USA			
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Christine A. J.		Howell	
Inventor's Signature		Date 3/19/04	
Residence: City Clinton Township		State MI	Country USA
Citizenship USA			
Mailing Address 35416 Golden			
Mailing Address			
City Clinton Township		State MI	ZIP 48035
Country USA			
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PTO/SB/81 (02-01)

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## POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/722,860
Filing Date	November 26, 2003
First Named Inventor	Robert R. Turvey
Title	Stacking Device for...
Group Art Unit	3727
Examiner Name	
Attorney Docket Number	J-3598A

I hereby appoint:

Practitioners at Customer Number

28165

Place Customer  
Number Bar Code  
Label here

OR

Practitioner(s) named below:

Name	Registration Number
William E. McCracken	30,195
Erin Fox	52,261
Anthony G. Volini	48,016
Matthew Fannin	51,268

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.

OR

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OR

Firm or  
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

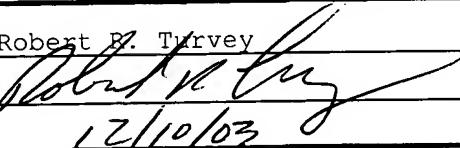
I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

### SIGNATURE of Applicant or Assignee of Record

Name	Robert R. Turvey
Signature	
Date	12/10/03

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

Total of Four forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



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Firm or  
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

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Name      Judith A. Gresham

Signature

*Judith A. Gresham*

Date

12-10-03

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Assignee of record of the entire interest. See 37 CFR 3.71.

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Name	Craig R. Gosen
Signature	
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